



## APPLICATION DATA SHEET

### Application Information

Application number:: 10/615,749  
Filing Date:: July 8, 2003  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?:: No  
Computer Readable Form (CRF)?:: No  
Number of copies of CRF:: None  
Title :: PORTABLE RACK FOR BUILDING MATERIALS AND METHOD OF USING SAME  
Attorney Docket Number:: 8491-54  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 10  
Small Entity?:: Yes  
Petition included?:: No  
Petition Type::  
Licensed U.S. Gov't Agency?:: No  
Contract or Grant No::  
Secrecy Order in Parent Appl.?:: No

## **First Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.
Status::	Full capacity
Given Name::	Donald
Middle Name::	F.
Family Name::	Swanson
Name Suffix::	
City of Residence::	Brier
State or Province of Residence::	WA
Country of Residence::	U.S.
Street of mailing address::	2483 Elm Drive
City of mailing address::	Brier
State or Province of mailing address::	WA
Country of mailing address::	U.S.
Postal or Zip Code of mailing address::	98036

## **Correspondence Information**

Correspondence Customer Number::	<b>22504</b>
Name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	206-903-3930
Fax Number:	206-628-7699

E-Mail address:: eunyoungchoi@dwt.com

### Representative Information

Representative Customer Number::		22504
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### Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation	10/140,970	05/07/02
10/140,970	Continuation	09/929,857	08/13/01
09/929,857	Continuation	09/399,628	09/20/99

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	